JUL 2 7 2004 Whom it may concern,

07-29-04 10/612,778 TPW

Hi,

My name is Jinyoung Kim.

I sent a patent application titled "Nozzle Comb" on July, 2003.

The payment for this application process (\$370) has been made by NARA Bank Check No. 144 on July, 2003.

Since then, I haven't received proper documents from the Patent Department. Although I faxed the photocopy of the check on Jan 1, 2004, on one of your representatives' request nothing has been done. Therefore, I am demanding the status check and progress report for my application.

Please, send Application Number and Confirmation number as soon as possible.

Sincerely,

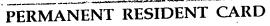
Jin Young Kim

PS: I am sending the photocopy of my check with the letter.

Email-oneluv32@hanmail.net

Phone #-718-892-4677





NAME KIM, JIN YOUNG



INS A# 045-809-042
Birthdate Caregory S
02/20/52 FA 10 Country of Birth
Korea South
CARDEXPIRES 07/06/07
Resident Space 07/06/97



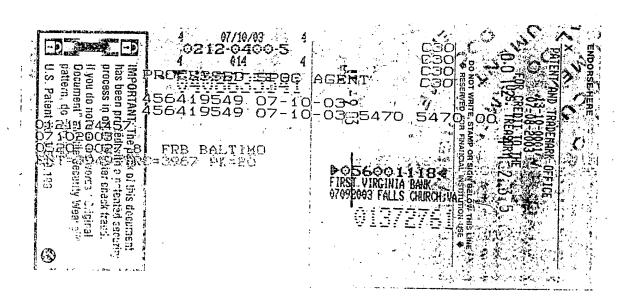
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NY01947804KOR5202201M07031941462710<<<<<12 PRKORKIM<<JIN<YOUNG<<<<<<<<<<<<< 이 여권은 별도의 기재가 없는 한 모든 국가에서 Signature of bearer 소지인의 서명 ൎ砵 ㅁ REPUBLIC OF KOREA JIN YOUNG 생년원일/Date of birth 20 FEB 52 REPUBLIC OF KOREA Տ otherwise endorsed for all countries unless This passport is valid NY0194780 MINISTRY OF FOREIGN AFF/ 型型型名/Authority 라06377810개



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SQ.	JIN YOUNG KIM 1957 BRONX DALE AVE. # C-32 BRONX, NY 10462	Date	1-1324/260.4 08 i
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Signature

10/612,778

Please type a plus sign (+) inside this box PTO/SB/21 (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE er the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** TRANSMITTAL **Filing Date FORM** First Named Inventor Group Art Unit (to be used for all correspondence after initial filing) **Examiner Name** Total Number of Pages in This Submission Attorney Docket Number **ENCLOSURES** (check all that apply) After Allowance Communication Assignment Papers Fee Transmittal Form (for an Application) to Group Appeal Communication to Board Fee Attached Drawing(s) of Appeals and Interferences Appeal Communication to Group Licensing-related Papers Amendment / Reply (Appeal Notice, Brief, Reply Brief) Petition After Final Proprietary Information Petition to Convert to a Affidavits/declaration(s) Provisional Application Status Letter Power of Attorney, Revocation Change of Correspondence Other Enclosure(s) (please **Extension of Time Request** Address identify below): Terminal Disclaimer **Express Abandonment Request** Permanent Resident Request for Refund Information Disclosure Statement CD, Number of CD(s) Certified Copy of Priority Document(s) Remarks Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Individual name Signature Date CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: Typed or printed name ouns Date

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10/612,778

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PTQ/SB/05 (03-01) Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorney Docket No. First Inventor

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS ASSISTANT Commissioner for Patents							
See MPEP chapter 600 concerning utility patent application contents.			ADDRESS TO: Box Patent Application				
Fee Transmittal Form (e.g., PTO/SB/17)			7. CD-ROM or CD-R in duplicate, large table or				
1. Submit an original and a duplicate for fee processing			Comp	uter Program (Appendix)	•	
2. See 37 CFR 1.27			Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)				
3. Specification (preferred arrangement)	[Total Pages [7]]		` —	puter Readabl	•		
✓- Descriptive title			b. Specification Sequence Listing on:				
✓- Cross Reference - Statement Reg	ce to Related Applications arding Fed sponsored R & D		i. CD-ROM or CD-R (2 copies); or				
- Reference to se	equence listing, a table,		ii. paper				
/ - Background of	program listing appendix the Invention		c. State	ements verifyin	g identity of at	oove copies	
- Brief Summary	of the Invention on of the Drawings (if filed)]	ACCOM	PANYING A	PPLICATION	ON PARTS	
- Detailed Descr			9. Assign	nment Papers	(cover sheet &	document(s))	
✓ - Claim(s)- Abstract of the	Disclosure			FR 3.73(b) Sta n there is an as		Power of Attorney	
4	J.S.C. 113) Total Sheets	\Box			Document (if a	, i	
5. Oath or Declaration	Total Pages	₹;	1121 1	mation Disclos		Copies of IDS	
	uted (original or copy)	۰ لــــ		ment (IDS)/PT minary Amendi		- Gitations	
Copy from a	prior application (37 CFR 1.63 (d)) tion/divisional with Box 18 complete	ed)	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
	ION OF INVENTOR(S)		15. Certified Copy of Priority Document(s) (if foreign priority is claimed)				
	tement attached deleting inventor(s) the prior application, see 37 CFR		Monnublication Request under 35 LLS C 122				
1.63(d)(2) and 1.33(b).			(b)(2)(B)(i). Applicant must attach form PTO/SB/35				
6. Application Data Sheet. See 37 CFR 1.76			or its equivalent.				
			ليبا ا	***********			
or in an Application Data She	CATION, check appropriate box, and et under 37 CFR 1.76:	ia suppiy the	e requisite intom	nation pelow a	na in a preiimii	nary amenament,	
Continuation	Divisional Continuation-in-par	t (CIP)	of prior applica	ation No.:			
Prior application information: Examiner Group Art Unit:							
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.							
The incorporation can only be	relied upon when a portion has been i			submitted app	lication parts.		
19. CORRESPONDENCE ADDRESS							
Customer Number or Bar Code Label (Insert Customer No. or Attach ber code label here) Or Correspondence address below			idress below				
Name Jim Young Kim							
1957 Bronxdale Ave #C-32							
Address				· ·			
City	BRONX	Stat	e V	1	Zip Code	104.62	
Country	<u>u. s A</u>	Telephor	1e 718) 892	2-4677	Fax		
Name (Print/Type)	J'm Young	Kim	Registration N	o. (Attorneyl	Agent)		
Signature	Ohn K	'u's			Date 7/	1/03	
Jurden Hour Statement: This form	is estimated to take 0.2 hours to comple	te. Time will	vary depending up	on the needs of	the individual ca	ise. Any comments on	

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	3700	0
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Complete if Known					
Application Number					
Filing Date	7/01/03				
First Named Inventor	Jin Young Kim				
Examiner Name					
Group Art Unit					
Attorney Docket No.					

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	3. A	DDIT	ION	AL FE	ES	
Order Order	Large	Large Entity Small Entity				
	Fee Code	Fee	Fee	Fee e (\$)	Fee Description	Fee Paid
Deposit Account Number 0831442861 #144	105	130	205	65	Surcharge - late filing fee or oath	
Deposit Account Name Nama Bank	127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
The Commissioner is authorized to: (check all that apply)	139	130	139	130	Non-English specification	
Charge fee(s) indicated below Credit any overpayments	147	2,520	147	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) during the pendency of this application	112	920*	112	920*	Requesting publication of SIR prior to	
Charge fee(s) indicated below, except for the filing fee to the above identified deposit account.	l		l		Examiner action	
FEE CALCULATION	113	1,840°	113	1.840*	Requesting publication of SIR after Examiner action	
1. BASIC FILING FEE	115	110	215	55	Extension for reply within first month	
Large Entity Small Entity	116	400	216	200	Extension for reply within second month	
Fee Fee Fee Fee Description	117	920	217	460	Extension for reply within third month	
Code (\$)	118	1,440	218	720	Extension for reply within fourth month	
101 740 201 370 Utility filing fee 370 106 330 206 165 Design filing fee	128	1,960	228	980	Extension for reply within fifth month	
107 510 207 255 Plant filing fee	119	320	219	160	Notice of Appeal	
108 740 208 370 Reissue filing fee	120	320	220	160	Filing a brief in support of an appeal	
114 160 214 80 Provisional filing fee	121	280	221	140	Request for oral hearing.	
	138	1,510	138 1	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 3170,00	140	110	240	55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	141	1.280	241	640	Petition to revive - unintentional	
Extra Claims below Fee Paid	142 1	1.280		640	Utility issue fee (or reissue)	
Total Claims 5 -20** = \(\tilde{\text{V}}\) \(\tilde{\text{V}}\) = \(\text{V}\)	143	460		230	Design issue fee	
Independent Claims . 3" = . X	144	620	244	310	Plant issue fee	
Multiple Dependent	122	130	122	130	Petitions to the Commissioner	
	123	50	123	50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee Fee Fee Fee Description	126	180	126	180	Submission of Information Disclosure Stmt	
Code (\$) Code (\$) .	581	40	581	40	Recording each patent assignment per property (times number of properties)	
103 18 203 9 Claims in excess of 20 102 84 202 42 Independent claims in excess of 3	146	740	246	370	Filing a submission after final rejection	
104 280 204 140 Multiple dependent claim, if not paid					(37 CFR § 1.129(a))	
109 84 209 42 ** Reissue independent claims over original patent	149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
110 18 210 9 ** Reissue claims in excess of 20	179	740	279	370	Request for Continued Examination (RCE)	
and over original patent	169	900	169	900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$)	Other fee (specify)					
**or number previously paid, if greater; For Reissues, see above	*Redu	iced by	Basic	Filing	Fee Paid SUBTOTAL (3) (\$)	

SUBMITTED BY	Complete (if applicable)	
Name (Print/Type)	Jm Young Kim Registration	10100110110110110110111111111111111111
Signature	In Kin	Date 7/01/03

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